

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF Dorothy Murphy	COURT CASE NUMBER 08C2027 08cv2027
DEFENDANT Fair Mont Care Center	TYPE OF PROCESS S/C

SERVE ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Fairmont Care Center
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 5061 N. Pulaski, Chicago, IL 60630

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

James Matthew Pfeiffer
Fuchs & Roselli, Ltd.
440 W. Randolph St., Suite 500
Chicago, IL 60606

Number of process to be
served with this Form - 285

1

Number of parties to be
served in this case

1

Check for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All
Telephone Numbers, and Estimated Times Available For Service):
Fold

FILED
JUN 04 2008 TC
6-4-2008
MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

05-07-08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy of Clerk TD	Date 05-07-08
---	---------------------------	--	---------------------------------------	---	-------------------------

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Bill Pfeiffer, Administrator

Address (complete only if different than shown above)

☒ A person of suitable age and dis-
cretion then residing in the defendant's
usual place of abode.

Date of Service

Time

am

5/15/08**2:50****PM**

Signature of U.S. Marshal or Deputy

George P. Peters

Service Fee 48.00	Total Mileage Charges (including endeavors) 9.70	Forwarding Fee 0	Total Charges 57.70	Advance Deposits 0	Amount owed to U.S. Marshal or 57.70	Amount of Refund 0
-----------------------------	---	----------------------------	-------------------------------	------------------------------	--	------------------------------

REMARKS:

1 DUSM x 1 hour @ 20 miles round trip. gpo